

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8-9-05</u>		2 Serial/Patent # <u>10/522724</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input checked="" type="checkbox"/> Filing		1	1-28-05	\$ 100							
<input type="checkbox"/> Amendment				\$							
<input type="checkbox"/> Extension of Time				\$							
<input type="checkbox"/> Notice of Appeal/Appeal				\$							
<input type="checkbox"/> Petition				\$							
<input type="checkbox"/> Issue				\$							
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$							
<input type="checkbox"/> Maintenance				\$							
<input type="checkbox"/> Assignment				\$							
<input type="checkbox"/> Other				\$							
		7 TOTAL AMOUNT OF REFUND		\$ 100							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
<input type="checkbox"/> Duplicate Payment		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">5</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> <td style="width: 20px;">3</td> <td style="width: 20px;">0</td> </tr> </table>			1	5	--	0	0	3	0
1	5	--	0	0	3	0					
<input type="checkbox"/> No Fee Due (Explanation):											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: _____			TITLE: _____								
SIGNATURE: <u>R. Johnson</u>			PHONE: _____								
OFFICE: _____											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____			DATE: _____								

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*